

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	CC		11-27-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S.B.	895	01-18-02
RESPONSE FORMALITY REVIEW	ka	1019	03-28-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
2	8/4
5	12/12
03	03/07
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Claim	Date
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Original	
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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855-3382  
 02/28/02  
 20/82 Kio  
 03/28/02  
 10/11/02